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Country programme document

Namibia

Summary

The country programme document (CPD) for Namibia is presented to the Executive Board for discussion and approval at the present session, on a no-objection basis. The CPD includes a proposed aggregate indicative budget of \$4.685 million from regular resources, subject to the availability of funds, and \$22 million in other resources, subject to the availability of specific-purpose contributions, for the period 2019 to 2023.

In accordance with Executive Board decision 2014/1, the present document reflects comments made by Executive Board members on the draft CPD that was shared 12 weeks before the second regular session of 2018

* E/ICEF/2018/19.

Note: The present document was processed in its entirety by UNICEF.



Programme rationale

1. The child population of Namibia was estimated at 1.09 million in 2017; 43 per cent of the population of 2.53 million.¹ Although the country's children are growing up in an upper-middle-income country with a stable Government, they also face challenges, including extreme income inequality (a 0.56 Gini coefficient²), high rates of HIV and AIDS (16.6 per cent HIV prevalence among females aged 15–49³) and recurrent droughts and floods. The small and ethnically diverse population spread over a large territory also creates obstacles to service delivery.
2. After two decades of strong growth, the economy remains heavily based on primary production (mining and agriculture), which is vulnerable to global commodity price fluctuations. At 34 per cent, unemployment is structurally high (mining contributes more than 10 per cent of the gross domestic product but just 2 per cent of employment). Among youth (15–34 years) the unemployment rate is 43 per cent.⁴
3. From 2010 to 2016, income poverty fell from 28.7 per cent to 18 per cent,⁵ but income inequality remains the second highest in the world and families with children are more likely to be poor.⁶ Despite sociopolitical stability since the country's independence, persistent inequalities along ethnic, disability, regional and residential area lines, as well as the growing unemployed youth population, still hinder equitable social progress.
4. Fertility rates are high (the crude birth rate was 33.7 per 1,000 in 2016⁷), and 19 per cent of pregnant women attending antenatal care in 2016 were 15–19 years old.⁸ Internal migration has led to urban and peri-urban growth, and a child dependency ratio (62.2 per cent)⁹ that keeps many children in vulnerable households. Namibia has a potential “demographic dividend” until 2030, during which investments in childhood and adolescence will maximise future social benefits.
5. The first 1,000 days of a child's life are critical for lifelong physical, mental and social development. However, neonatal mortality is still high (17.8 deaths per 1,000 live births in 2016¹⁰ down from 20 deaths per 1,000 live births in 2013¹¹), and amounts to 40 per cent of under-five mortality.
6. The immunization rate has stagnated, with only 63 per cent of children aged 12–23 months fully vaccinated against the major childhood killer diseases.¹² Namibia has

¹ United Nations Department of Economic and Social Affairs, Population Division, World Population Prospects: The 2017 Revision.

² Namibia Statistics Agency, Namibia Household Income and Expenditure Survey (NHIES), 2015/2016.

³ Joint United Nations Programme on HIV/AIDS, Namibia Spectrum modelling estimates, 2017.

⁴ Namibia Statistics Agency, Namibia Labour Force Survey Report, 2016.

⁵ NHIES 2016.

⁶ Sulla V. et al, ‘Does fiscal policy benefit the poor and reduce inequality in Namibia?’, Working Paper, World Bank, 2017.

⁷ Namibia Statistics Agency, *Namibia Inter-censal Demographic Survey 2016 Report*, 2017.

⁸ Ministry of Health and Social Services, National Strategic Framework for HIV and AIDS Response in Namibia 2017/18 to 2021/22 (NSF), 2017.

⁹ World Population Prospects: The 2017 Revision.

¹⁰ United Nations Inter-agency Group for Child Mortality Estimation, *Levels & Trends in Child Mortality Report*, 2017.

¹¹ Ministry of Health and Social Services, Namibia Demographic and Health Survey (NDHS), 2013.

¹² NDHS 2013.

introduced new vaccines but suffers weak district-based planning and experiences stock-outs because of procurement system inefficiencies.

7. Stunting rates remain high for a middle-income country, at 24 per cent of under-five children in 2013.¹³ Premature complementary feeding increases the risk of nutritional deficiencies and exposure to unsafe water. Rural access to improved water deteriorated between 2000 and 2015; dependence on untreated surface water increased by 8.2 percentage points, with an additional 110,000 people relying on these unsafe water sources.¹⁴ The expansion of informal peri-urban settlements has resulted in increased use of unimproved surface water, and an additional 138,000 people in urban areas practicing open defecation.

8. The impact of the HIV epidemic on newborns has been significantly reduced. The mother-to-child transmission rate of HIV fell from 24 per cent in 2005 to 4 per cent in 2017.¹⁵ Adopting new guidelines for prevention of mother-to-child transmission of HIV (PMTCT) and rolling out Option B+ ensured that, in 2017, 95 per cent of health facilities offered PMTCT services, 95 per cent of pregnant women living with HIV accessed antiretroviral therapy during antenatal care, and 93 per cent of infants born to mothers living with HIV were receiving antiretroviral medicines. The major remaining barriers to eliminating mother-to-child transmission of HIV include a low level of male engagement; stock-outs of tests and drugs; lack of knowledge about HIV; and low uptake of HIV testing and counselling among adolescents (28.5 per cent males, 13.1 per cent females).¹⁶

9. Timely birth registration and certification are both a right and a prerequisite for accessing other services, including early identification and support for children with disabilities. Several system-based reforms have occurred to integrate birth registration in the hospitals where most deliveries (76.9 per cent¹⁷) take place. These reforms significantly increased birth registration rates, which are currently 78 per cent of all under-five children.¹⁸

10. In a country where only 16.5 per cent of children aged 0–4 years attend early childhood development (ECD) programmes,¹⁹ many children are left behind, resulting in low access to pre-primary education (5 per cent).²⁰ There is a need for scaled-up access to multisectoral ECD services, especially for children from low-income households, and to improve physical standards, especially in rural facilities. Professional capacities of ECD staff need to be strengthened, and linkages improved between ECD providers, community health workers and effective parenting interventions. Access to ECD and pre-primary education for children with disabilities is a challenge due to the lack of early identification and referral for support. Teachers are inadequately skilled to address the individual needs of children with disabilities, while schools are poorly resourced in terms of infrastructure and assistive technologies and devices.

11. Namibia made significant progress in broadening access to education by introducing free universal primary and secondary education in 2013 and 2016, respectively, with net enrolment currently at 94.8 per cent for 7- to 13-year-olds and

¹³ NDHS 2013.

¹⁴ World Health Organization/United Nations Children's Fund, Joint Monitoring Programme, 2017.

¹⁵ UNAIDS, *Spectrum Modelling Estimates*, 2017.

¹⁶ NSF 2017.

¹⁷ Namibia Inter-censal Demographic Survey (NIDS) 2016.

¹⁸ NIDS 2016.

¹⁹ NIDS 2016.

²⁰ NIDS 2016.

90.2 per cent for the 7–18-year-old age group.²¹ Although the Government devotes more than 10 per cent of the national budget to education²², poor learning outcomes persist. High drop-out and repetition rates affect more boys than girls, from the early years onwards. In the most remote areas, less than 1 per cent of children entering Grade 1 complete secondary education.²³ School retention is also undermined by increasing rates of pregnancy among schoolgirls, an issue that is poorly managed. Unqualified and underqualified teachers, poor school infrastructure (including water and sanitation facilities), lack of support for children with disabilities and other special needs, and sub-standard accommodation for teachers and students also hamper quality teaching and learning outcomes.

12. Widespread violence against children, in both childhood and adolescence, has a devastating impact on health, development and learning. In 2013, a national survey assessed this for the first time and found that 31 per cent of 15- to 19-year-olds reported having experienced physical violence.²⁴ In 2017, the Ministry of Gender Equality and Child Welfare recorded 4,245 cases of violence against children. Violence against children is often very difficult to prevent, detect, report and refer. Persistent challenges include coordination between the various stakeholders and ministries involved in addressing violence against children, limited capacity of health officers, educators and communities, and cultural barriers to accessing services.

13. Overall, the legislative framework defines and promotes the rights of children. The Constitution of the Republic of Namibia, 1990, recognizes the rights and freedoms of all citizens. The 2015 Child Care and Protection Act largely enshrines the Convention on the Rights of the Child in national law, pending government approval of regulations required for its implementation.

14. The main bottlenecks to realizing child rights are less about inadequate funds and more about inefficient spending patterns and insufficiently qualified human resources at all levels to ensure quality service provision. Inequalities in service provision strongly correlate with the country's unequal income distribution, with the poorest communities being the least well served.

15. Namibia has several government-funded social protection mechanisms for the elderly, veterans, persons with disabilities and vulnerable children. These have been shown to mitigate disparities in income.²⁵ However, the mechanisms are fragmented and do not always reach those persons who are most in need. In addition, the value of the child welfare grant is eroded by inflation.

16. Specific gender issues of concern include low rates of awareness among adolescents of sexual and reproductive health (and HIV); high pregnancy rates among adolescent girls; higher drop-out rates among boys, especially at secondary level; low male involvement in PMTCT; and inadequate gender and age disaggregation in national data reporting systems.

17. Namibia is prone to natural disasters, disease outbreaks and food insecurity, which negatively affect human development. A recent assessment highlighted capacity gaps and opportunities to build resilience, including information management, multi-hazards early-warning systems, contingency planning, financing

²¹ NIDS 2014.

²² UNICEF Namibia, *Education Budget Brief*, 2017.

²³ Ministry of Education, *Teacher Incentive Study*, 2014.

²⁴ NDHS 2011.

²⁵ World Bank, 'Does Fiscal Policy Benefit the Poor and Reduce Inequality in Namibia?' 2017.

and developing capacity to effectively implement the national disaster risk management system.²⁶

18. The following lessons learned from the previous country programme contributed to the design of the current programme:

(a) The programme should shift emphasis from developing policies and legislation to identifying and addressing the bottlenecks at subnational level that prevent these policies and laws from having a wider impact, especially for the most vulnerable;

(b) The programme should deepen an integrated and rights-based approach to ensure delivery of a cohesive set of services at the community and facility level, using innovative approaches and technologies, and strengthen subnational response planning and analysis through collection and dissemination of real time data; and

(c) The programme should leverage the resources of the Government of Namibia and development partners for children, through:

(i) National development processes such as national development plan design, monitoring and reporting;

(ii) Pro-poor, pro-child and gender-responsive budget processes; and

(iii) The Government's priority of poverty eradication, with a focus on multiple levels of deprivation and child poverty.

Programme priorities and partnerships

19. Under the "Delivering as one" modality adopted in Namibia in 2014 and the United Nations reform agenda, this country programme will contribute to the planned results of both the United Nations Partnership Framework (UNPAF) 2019–2023 and the Fifth National Development Plan of Namibia. The overall goal of the country programme is to contribute to national efforts to enable children and adolescents to realize their rights by progressively reducing disparities and inequities.

20. To achieve this goal, the country programme will employ a mix of strategies to accelerate progress with a focus on equity through:

(a) *Capacity development* for strengthened systems; identifying and addressing bottlenecks to implementing policy at scale to deliver quality services; creating demand for services and sustaining these services; and supply financing and procurement services and supply system strengthening. In addition, joint United Nations area-based programming will model the delivery of integrated services to inform the country's decentralization programme.

(b) *Public finance management and analysis* to leverage government and partner programmes and resources for children, with a focus on increased effectiveness of spending rather than increased allocation;

(c) *Evidence and advocacy* for information management, systems integration and reporting to ensure that data and research are used to improve policies, resource allocation, programmes and accountability;

(d) *Community engagement, social accountability and communication for development* will complement the other strategies and enhance social accountability

²⁶ Capacity for Disaster Reduction Initiative, *Capacity Assessment Report of the National Disaster Risk Management System in Namibia*, 2016.

for children's rights, including empowering communities to demand services and promoting positive behaviours; and

(e) *Innovation and South-South cooperation*: Emphasis will be placed on technology-for-development initiatives to strengthen communication and reporting. UNICEF will promote learning and sharing of innovations and best practice within the subregion and beyond, using the Southern African Development Community and African Union structures to ensure alignment of policy with international agreements.

21. The country programme will have four components: (a) child survival and development; (b) adolescent development and participation; (c) child-friendly environment; and (d) programme effectiveness.

22. These programme components will contribute to achievement of the Sustainable Development Goals, especially Goals 1 to 6, and the social transformation pillar of the UNPAF. The child-friendly environment and programme effectiveness components will also support the economic progression and good governance pillars of the UNPAF.

23. Integrated programming will be at the heart of the country programme, as will ensuring an equity focus across all interventions so that all children have access to quality and inclusive services. Human rights, gender and disability will be mainstreamed in the programme components. In line with the UNICEF Gender Action Plan, 2018–2021, analysis and programme design will address discriminatory norms and practices and promote the empowerment of girls and women.

24. The country programme also responds to observations and recommendations arising from a review of the latest States parties reports on the Convention on the Rights of the Child, the Convention on the Elimination of All Forms of Discrimination Against Women, the Convention on the Rights of Persons with Disabilities and the African Charter on the Rights and Welfare of the Child.

Child survival and development

25. UNICEF will contribute to the following outcome: All Namibian children from 0–10 years old have improved access to quality and equitable maternal, neonatal and child health, nutrition, education, child protection, ECD, civil registration, and water, sanitation and hygiene (WASH) services.

26. To achieve this, UNICEF will strengthen multisectoral service delivery systems and build national capacity to provide an essential package of quality, high-impact integrated services for the first decade of a child's life, and particularly the first 1,000 days.

27. On maternal, neonatal and child health and nutrition, UNICEF will work closely with the World Health Organization, the United Nations Population Fund, the Joint United Nations Programme on HIV/AIDS, the World Food Programme and the Food and Agriculture Organization of the United Nations to support the scale-up of government services by identifying and systematically removing the bottlenecks at subnational level that prevent the implementation of government plans and policies. Areas of collaboration will include the Emergency Obstetric and Neonatal Care Strategic Plan, the Every Newborn Action Plan, the integrated community case management of childhood illness strategy, the Scaling Up Nutrition Country Implementation Plan, the Community-Led Total Sanitation approach and the Road Map for the Elimination of Mother-To-Child Transmission of HIV. UNICEF will strengthen management of immunization services by implementing the Reach Every

Child approach to ensure full vaccination within the first 12 months of life. The programme will contribute to achieving the agenda for universal health coverage.

28. To address violence against children in the first decade of life, UNICEF will support the use of data for planning (with the Centers for Disease Control and Prevention in the United States); scale-up training of police, magistrates, prosecutors and social workers on the procedures for handling cases involving children; and raise community awareness and create close links with the health and education sectors to prevent, detect and refer cases of violence.

29. The approach to early learning and stimulation in Namibia integrates multisectoral planning and services for infants and young children to reduce the high repetition rates in Grade 1; reduce overage children in Grade 1; promote universal provision of pre-primary education; and improve foundational numeracy and literacy. UNICEF will support the Government and civil society partners to scale-up access to ECD centres, pre-primary and junior primary to improve early learning and stimulation, especially for children from marginalized, poor and remote areas. This will also include supporting financial analysis to improve the efficiency and effectiveness of budgetary allocations and spending.

30. Children provided with the best start in life can transition into the second decade of life healthier and better equipped for future learning. Assistance from UNICEF will ensure multisectoral approaches to support development in the early years and close linkages with programme component 2: adolescent development and participation.

Adolescent development and participation

31. UNICEF will contribute to the following outcome: By the end of 2023, adolescents are learning, healthy, developing and participating in an environment free from violence, exploitation and abuse.

32. To achieve this, UNICEF will strengthen multisectoral service delivery systems and build national capacities to provide an essential package of quality, high-impact integrated support to education, health (including nutrition, WASH and sexual and reproductive health), child protection and adolescent empowerment.

33. UNICEF will advocate for the institutionalization of child participation in Parliament and with local authorities. UNICEF will also promote adolescent participation through school boards and peer education groups, to hold schools accountable for improving learning outcomes.

34. The programme will focus on providing technical support to the Ministry of Education, Arts and Culture to improve gender-responsive, equitable spending on education and effective use of data for planning. Support will be provided to strengthening systems to increase quality service delivery and outcomes to reduce repetition rates and the number of dropouts. The Social Accountability and School Governance Programme, the Integrated School Health Programme and implementation of the National Safe Schools Framework will be supported to remove the barriers that prevent children from staying in school. UNICEF will support an analysis of efficiency and effectiveness in budgetary allocations and spending for improved learning outcomes and transition in the education life cycle.

35. UNICEF will support the Government to roll out menstrual health and hygiene interventions so as to increase adolescent girls' access to supplies and appropriate facilities.

36. In the area of integrated sexual and reproductive health and HIV prevention, treatment and care, the country programme will accelerate provision of integrated adolescent-friendly health and nutrition services, within the Joint United Nations Team on HIV and AIDS. UNICEF will support health workers to implement adolescent-friendly health services guidelines in all health facilities; to expand adolescent HIV testing services; and to ensure that adolescents living with HIV are provided with treatment and supported to suppress their viral load. School-based life skills and comprehensive sexuality education will be sustained by enhancing the quality of curriculum delivery as well as school-based health services.

37. Within the framework of the global End violence against children campaign, UNICEF will strengthen national capacity to legislate, plan and budget for scaling up interventions that prevent and respond to violence, abuse, exploitation and neglect of children and adolescents (including online protection). UNICEF will support implementation of a case management system, including developing tools, protocols and procedures to improve tracking and referral of cases of violence, exploitation and abuse.

Child-friendly environment

38. UNICEF will contribute to the following objective: The creation of a safe, resilient and supportive environment for all children, adolescents and their families.

39. The organization will work towards a sustainable reduction in multidimensional deprivation among marginalized children and adolescents in Namibia. Efforts will focus on building their resilience to economic and climate-related shocks.

40. The generation and use of evidence to advocate for equitable access to government-funded (and inflation-protected) social grants that benefit all children will be supported. Partnerships will be strengthened with key line ministries for a more integrated, effective and efficient social protection system, and to ensure that social protection reinforces access to other social services, including birth registration. UNICEF will also work with the media, civil society and local authorities to encourage uptake of and accountability for social protection services.

41. The adverse effects of climate change, natural disasters and disease outbreaks deprive children, especially the most disadvantaged, of their rights to health, nutrition and food security, protection and education. To increase recovery and resilience to these shocks, UNICEF will focus on supporting humanitarian assessments that include a child focus and are disaggregated by age, gender and disability. With other United Nations funds and programmes, UNICEF will advocate for prioritization of the most vulnerable (women, children, persons with disabilities and persons living with HIV) in preparedness, resilience-building and response activities.

Programme effectiveness

42. The programme effectiveness component will provide quality assurance and cross-sectoral coordination and support of the other components of the country programme and contribute to the following outcome: By the end of 2023, government institutions at the national and regional level are routinely reporting on the realization of the rights of all children and adolescents.

43. Programme coordination will use joint planning and regular reviews to ensure alignment and coherence of interventions across the three programme components, and alignment with the Government's coordination structures. UNICEF will work within the framework of the UNPAF to support collective results.

44. To benefit the most disadvantaged children, results-oriented programming will promote the generation, analysis and use of evidence for improved equity-focused planning, monitoring and evaluation of programmes. The Namibia Statistics Agency, higher institutions of learning and local research organizations will be strengthened through UNICEF support in order to generate timely, quality, disaggregated, child-focused and gender-sensitive research, data and reports. UNICEF will also support data and sectoral information systems management, including for cross-cutting issues such as gender and disability.

45. UNICEF will advocate for and influence gender-responsive and child-friendly budgeting with the Government and local private sector, focusing on increasing the effectiveness and efficiency of public finance for children.

46. Communication for development, including the use of information technology, will be utilized to create and sustain demand for social services, provide a platform for children's voices, and overcome harmful social norms and practices that violate the rights of children and adolescents and perpetuate gender disparities.

47. UNICEF will nurture strategic partnerships to leverage resources for the realization of child rights in Namibia. In partnership with government institutions and civil society, youth organizations will be supported to actively participate in programming for children and adolescents. New strategic alliances will be formed with the private and philanthropic sectors for specific programmes. Above all, UNICEF will play a convening role for stakeholders to partner effectively to realize the rights of children and adolescents. South-South networks will be used to promote mutual learning and exchange of good practices.

Summary budget table

<i>Programme component</i>	<i>(In thousands of United States dollars)</i>		
	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
Child survival and development	1 000	8 500	9 500
Adolescent development and participation	1 000	7 500	8 500
Child-friendly environment	1 000	1 000	2 000
Programme effectiveness	1 685	5 000	6 685
Total	4 685	22 000	26 685

Programme and risk management

48. This country programme document outlines UNICEF contributions to national results and serves as the primary unit of accountability to the Executive Board for results alignment and resources assigned to the programme at the country level. Accountabilities of managers at the country, regional and headquarters levels with respect to country programmes are prescribed in the organization's programme and operations policies and procedures.

49. This country programme will be coordinated under the UNPAF 2019–2023, and implemented under the leadership of the National Planning Commission and in collaboration with line ministries, parastatal institutions, civil society organizations, the private sector, research institutions and universities.

50. The main risks to achieving the planned results and the proposed measures to mitigate them are as follows:

(a) *Declining donor support to Namibia.* Given the decline in development assistance since 2009, UNICEF will continue to advocate for more domestic resources to focus on vulnerable children and adolescents, and for the prioritization of children and adolescents in development partners' programmes and budget allocations. This advocacy will be done through generating and sharing of evidence on the unequal outcomes for children and adolescents, the key bottlenecks to progress and the effectiveness of programmes and interventions to address the situation. UNICEF will also mobilize other resources (OR) for the country programme through close engagement with donors in country and abroad, using quality proposals and donor reports, human interest stories and country visits.

(b) *Risk of natural disasters.* Namibia is prone to floods, droughts and disease outbreaks, which have a negative effect on human development. Resources for human development priorities are consistently diverted to disaster response, delaying the implementation of development programmes. UNICEF will work closely with other United Nations funds and programmes and development partners to strengthen early warning and disaster risk management systems.

(c) *Vulnerability to external economic shocks.* The country's high level of dependence on imported goods and on external markets for export of natural resources (the bulk of its economy) means that external shocks may quickly affect its economic well-being. With the United Nations country team and other development partners, UNICEF will work to strengthen social safety nets for the most vulnerable.

51. A business operations strategy will harmonize and reduce business operating costs, and the United Nations funds and programmes will continue to share common premises and services.

52. UNICEF will continue to monitor the effectiveness of governance and management systems, stewardship of financial resources and management of human resources. Management of the harmonized approach to cash transfers will be strengthened to mitigate risks to programme implementation.

Monitoring and evaluation

53. UNICEF will monitor results through annual management plans and yearly workplans, and through peer reviews with the Government and implementing partners to assess key strategic, programmatic, operational and financial risks, and define appropriate risk control and mitigation measures.

54. Progress towards planned results will be monitored using the results and resources framework indicators, based on the UNPAF 2019–2023, the UNICEF Strategic Plan, 2018–2021 and the Eastern and Southern Africa regional priorities. UNICEF will work with the Namibia Statistics Agency and other United Nations funds and programmes to monitor progress towards national and international goals and track inequities using timely data.

55. UNICEF will also work with partners to strengthen national monitoring and evaluation capacity by institutionalizing results-based management. Emphasis will be placed on implementing subnational planning processes, improving programme performance monitoring, and creating feedback mechanisms to strengthen systems by mainstreaming the UNICEF Monitoring Results for Equity System.

56. In coordination with the Government, UNICEF will evaluate specific interventions and approaches (see the costed evaluation plan, which is being

presented in conjunction with this CPD) and conduct mid- and end-term country programme reviews to determine programme relevance, effectiveness, efficiency and impact. The country programme will prioritize periodic surveys, studies and research on key issues. Additional research will be undertaken as needed to provide more in-depth analysis on key issues.

Annex

Results and resources framework

Namibia – UNICEF country programme of cooperation, 2019–2023

Convention on the Rights of the Child: All articles National priorities: Fifth National Development Plan (2017/18–2021/22), Harambee Prosperity Plan (2016/17–2019/20), Sustainable Development Goals 1 to 6 and 10	United Nations Partnership Framework (UNPAF, 2019–23) child-related outcomes and indicators: By 2023, most vulnerable women, children, adolescents and young people in Namibia have access to and utilize quality integrated health care and nutrition services – Rate of stunting among under-five children. Baseline: 23.8% (2013); Target: 14% – Maternal mortality rate. Baseline: 265/100,000 live births (2015); Target: 200/100,000 live births – Neonatal mortality rate. Baseline: 15.9/1,000 live births (2015); Target: 10/1,000 live births – Skilled birth attendance rate. Baseline: 87.5% (2013); Target: 97% – Adolescent birth rate, per 1,000 adolescent girls. Baseline: 82 (2013), Target: 65 – New HIV infections. Baseline: Overall 5,271, adolescent girls 1,000; young women 2,323 (2016); Target: Overall 1,318; adolescent girls 400; young women 1,400 – Household out-of-pocket health expenditure. Baseline: 9% (2014/15); Target: <9% – Proportion of population using safely managed sanitation services, including hand-washing facility with soap and water. Baseline: 53% (2016); Target: 70%. By 2023, the most vulnerable children and young people in Namibia have equitable access to quality education and lifelong learning. – Enrolment rate children aged 0–5 in early childhood development (ECD) programmes. Baseline: 24.6% (2016); Target: 40% – Enrolment rate children aged 5–18 in pre-primary, primary and secondary education. Baseline: Pre-primary: 19.2%; primary: 94.8%; secondary: 56.5% (2016); Target: Pre-primary: 50%; primary: 99%; secondary: 70% – Primary completion rate. Baseline: 83.4% (2016); Target: 90% – Repetition rate: Grade 7. Baseline: 89% (2016); Target: 100% – Repetition rate: Grade 10. Baseline: 60% (2016); Target: 85% By 2023, the most vulnerable women and children are empowered and protected against violence, abuse, neglect and exploitation. – Number of identified potential victims of trafficking (2013). Baseline: 8 per year; Target: 16 per year By 2023, the most vulnerable children, persons with disabilities, indigenous people, and the poor utilize quality, integrated social protection services – Percentage of the national budget allocated to non-contributory social protection. Baseline: 3.5% (2016/17 financial year (FY)); Target: 5% (2023/24 FY)
	Related UNICEF Strategic Plan, 2018–2021 Goal Areas and outcome statements: Every child survives and thrives Outcome statement 1: Girls and boys, especially those that are marginalized and those living in humanitarian conditions, have access to high-impact health, nutrition, HIV and ECD interventions from pregnancy to adolescence.

Every child learns

Outcome statement 2: Girls and boys, in particular the most marginalized and those affected by humanitarian situations, are provided with inclusive and equitable quality education and learning opportunities.

Every child is protected from violence and exploitation

Outcome statement 3: Girls and boys, especially the most vulnerable and those affected by humanitarian situations, are protected from all forms of violence, exploitation, abuse and harmful practices.

Every child lives in a safe and clean environment

Outcome statement 4: Sustained use of safe water and sanitation services and adoption of hygiene practices and strengthened systems for a clean and safe environment for all children, women, girls and boys, particularly the most disadvantaged and those affected by humanitarian situations

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)			
Child survival and development						RR	OR	Total
1. All Namibian children from ages 0–10 years have improved access to quality and equitable maternal, neonatal and child health, education, child protection, ECD, civil registration, nutrition and WASH services by 2023	National budget allocated for health B: 13% (2015), T: 15 %	National budget book/ budget briefs	Output 1: Relevant high-level decision makers ensure equitable resource allocation, efficient spending for maternal, newborn and child health; child protection, ECD, education, sanitation and nutrition is implemented. Output 2: Capacity of service providers to provide quality and integrated health, HIV, nutrition, education, sanitation, birth registration and child protection services is improved Output 3: Capacity of communities, parents, children, and religious and traditional leaders is increased to demand and access quality integrated services for maternal, newborn and child health, sanitation, child protection, ECD and nutrition	United Nations funds and programmes Ministry of Health and Social Services (MOHSS); Ministry of Education, Arts and Culture (MOEAC); Ministry of Home Affairs and Immigration (MHA); Ministry of Agriculture, Water and Forestry (MAWF); Ministry of Gender Equality and Child Welfare (MGEWC), Civil society, academia, media, professional associations, training institutes, development partners.	1 000	8 500	9 500	
	Share of education budget allocated to pre-primary/primary B: 6%/32% (2016), T: 10%/40%							
	Percentage of children aged 0–6 months old exclusively breastfed B: 49% (2013), T: 80%	Demographic and Health Survey (DHS)						
	Percentage of children fully immunized by 12 months B: 68% (2013), T: 80%	DHS						
	Percentage of HIV-exposed newborns tested HIV positive B: 4% (2015), T: 2%	National Strategic Framework for HIV and AIDS Response in Namibia progress reports						

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
2. By the end of 2023 adolescents are learning, healthy, developing and participating in an environment free from violence, exploitation and abuse	Repetition rate: Grade 1 B: 19.9% (2016), T: 5%	Education Management Information System (EMIS)					
	Repetition rate: Grade 5 B: 20.3% (2016), T: 5%						
	Number of learners enrolled at pre-primary level B: 41 091 (2016), T: 80 000	Annual education census					
	Under-five birth registration services B: 78% (2013), T: 85%	DHS					
Adolescent development and participation	Proportion of population practising open defecation. B: 52% (2013), T: 25%	DHS	Output 1: Government is able to advocate for institutionalization of child participation in decision-making Output 2: Increased capacity of services providers for integrated health, HIV, nutrition, education, sanitation and child protection services in a conducive, safe and protective environment for adolescents Output 3: Increased capacity of adolescents to demand and access quality integrated services for health, HIV, nutrition, education, sanitation and child protection	United Nations funds and programmes MOHSS; MOEAC; MGECEW; Namibian Police Force; Parliament; civil society, youth organizations	1 000	7 500	8 500
	Number of additional adolescent girls and boys participating in or leading civic engagement initiatives through UNICEF-supported programmes B: 0 (2017), T: 5,000	Parliament and partner reports.					
	Percentage of Namibian women (age 15–19) who ever experienced violence since age 15. B: 31.5% (2013), T: 15%	DHS					
	Adolescents ages 15–19 who were tested for HIV and	HIV sentinel surveys					

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome - regular resources (RR), other resources (OR) (in thousands of United States dollars)		
					RR	OR	Total
	received their results in the past 12 months B: 21% (2016), T: 35%						
	Live births per 1,000 women aged 15–19 years B: 82.0 (2013), T: 65	DHS					
	Promotion rate Grade 7: B: 89% (2016), T: 100% Promotion rate Grade 10: B: 60% (2016), T: 85%	EMIS					
Child-friendly environment							
3. Vulnerable children ages 0–18 years have increased access to equitable and efficient social protection systems for reduced poverty and improved child-friendly environments	Percentage of the national budget allocated to non-contributory social protection B: 3.5% (2016/17 FY), T: 5% (2023/24 FY)	National budget book/budget briefs	Output 1: Service providers capacitated to implement efficient evidence-based social protection policies, plans and budget.	United Nations funds and programmes	1 000	1 000	2 000
	Number of additional interventions for climate-resilient communities as a result of UNICEF support B: 0 (2018), T: 5	Partner reports.	Output 2: Service providers capacitated to protect Namibian children against epidemics and the impacts of climate change.	Ministry of Environment and Tourism; Ministry of Poverty Eradication and Social Welfare; Ministry of Mines and Energy; Ministry of Finance; MGEWC; Namibia Statistics Agency; Office of the Prime Minister			
	Disaster risk management system in Namibia both child-sensitive and functional at the national and regional levels. B: 1 (national), T: 14 (regions)	Office of the Prime Minister					
Programme effectiveness							
By the end of 2023, government institutions at	Timely submission of States parties reports: Convention on	Office of the United Nations	Output 1: National Statistics Development Framework in place	Namibia Statistics Agency,	1 685	5 000	6 685

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
the national and regional level are routinely reporting on the realization of the rights of all children and adolescents	the Rights of the Child, Convention on the Elimination of All Forms of Discrimination against Women, Convention on the Rights of Persons with Disabilities and African Charter on the Rights and Welfare of the Child. B: 0 (2018), T: 4	High Commissioner for Human Rights	for child rights reporting and accountability.	National Planning Commission			
	Number of child-related Sustainable Development Goal indicators in national reporting mechanism B: TBD, T: All	Sustainable Development Goal progress reports (National Planning Commission)					
	UNICEF dashboard key performance indicators	Insight dashboard					
Total resources					4 685	22 000	26 685